



Borough of Nuneaton

Annual Report

of the

School Medical Officer

for 1952

G. R. KERSHAW, M.A., M.R.C.S., L.R.C.P., D.P.H.

School Medical Officer

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NUNEATON COMMITTEE FOR EDUCATION

(As on December 31st, 1952)

Alderman C. J. S. Dickens (Chairman)

His Worship the Mayor (Councillor H. A. Corbett)

Alderman W. R. Chamberlain, J.P. Alderman P. Woodward

Councillor R. Hadden Councillor W. F. Harris

„ H. Deans „ C. P. Mann

„ J. H. Bostock „ A. E. W. Southorn

„ F. B. J. Warr „ E. W. Daffern

„ H. J. Deeming „ L. Whetstone

Councillor R. Wilkinson

CO-OPTED MEMBERS:

The Rev. Father B. F. Cox The Rev. Canon F. S. Herbert

Mr. J. Riley (N.S.P.C.C.) Mr. W. L. Smith, B.Sc.

REPRESENTATIVES OF THE LOCAL EDUCATION AUTHORITY,

NOMINATED MEMBERS:

County Alderman Miss A. H. Moreton

County Councillor H. Cox

County Councillor B. W. Yardley

Mr. J. E. Cope, J.P.

The Director for Education: Mr. R. F. Hargreaves, B.Sc.

STAFF OF THE SCHOOL MEDICAL DEPARTMENT

School Medical Officer	{ G. R. KERSHAW, M.A., M.R.C.S., L.R.C.P., D.P.H.
Assistant School Medical Officers	{ G. K. G. COOTE, M.B.B.S., M.R.C.S., L.R.C.P. L. S. STEPHENS, M.B., Ch.B., D.R.C.O.G., D.P.H. D. S. WILLIAMS, L.R.C.P., L.R.C.S. (Edin.), L.R.F.P.S. (Glas.) (transferred 30.4.52) M. J. KELLY, L.R.C.P.I., L.M. (National University of Ire- land), L.R.C.S.I., L.M., D.P.H. (resigned March, 1952) M. STEANE, M.B., Ch.B. (commenced 1.5.52) W. E. RIGBY, M.B., Ch.B. (commenced 11.11.52)
Part-time Assistant School Medical Officers	{ E. A. LUMLEY, C.B.E., M.C., M.D. (Dublin), M.B., B.Ch., B.A.O., D.P.H. (commenced 4.6.52) B. SLOAN, M.B., Ch.B. (commenced 10.3.52)
Consultant and Surgeon— Orthopædic Clinic	{ J. H. PENROSE, M.B., B.Chir., F.R.C.S., M.R.C.S., L.R.C.P.
School Oculist	{ C. E. CLARK, M.B., Ch.B., D.O.M.S.
School Dental Officers (Part-time)	{ MRS. L. J. M. KNOX SGN.-CMDR. S. BROWN, R.N. (commenced 27.2.52) W. H. FERRISS (commenced 7.7.52) (resigned 19.8.52)
Dental Attendant	MISS L. JACKSON
Consultative Psychiatrist— Child Guidance Clinic	{ K. R. THOMAS, M.R.C.S., L.R.C.P., D.P.M.
Speech Therapist	MISS M. THOMAS, L.C.S.T.
School Nurse	MRS. L. G. BOFF
Health Visitors School Nurses	{ MISS K. N. DAVIES MISS K. T. FLYNN MISS I. SNAPE MISS M. A. HALLSWORTH MISS G. SCHOFIELD (commenced 1.11.52) MISS E. FIFE (commenced 1.11.52) MISS E. FOX (resigned 30.7.52)
Clerical Staff	W. WOOD (Chief Clerk)

SCHOOLS WITHIN THE BOROUGH

PRIMARY SCHOOLS

County Schools	No. on the roll 31-12-52				
Attleborough (Senior, Junior)	493
Attleborough (Infants)	204
Chilvers Coton (Junior)	367
Chilvers Coton (Infants)	253
Galley Common (Senior, Junior, Infants)	189
Heath End (Junior, Infants)	166
Higham Lane (Junior)	373
Higham Lane (Infants)	232
Queen's Road (Junior)	592
Queen's Road (Infants)	376
Shepperton (Junior)	365
Stockingford Boys (Senior, Junior)	469
Stockingford Girls (Senior, Junior)	445
Stockingford (Infants)	302
Middlemarch (Junior)	124

Voluntary Schools

Abbey Street C.E. (Junior)	...	...	...	...	333
Abbey Street C.E. (Infants)	...	...	...	...	209
Attleborough C.E. (Infants)	...	...	...	...	121
Chilvers Coton C.E. (Infants)	...	...	...	...	216
Stockingford C.E. (Senior, Junior, Infants)	...	...	...	...	251
Vicarage Street C.E. (Junior)	...	...	...	...	222
Vicarage Street C.E. (Infants)	...	...	...	...	127
St. Joseph's R.C. (Senior, Junior, Infants)	...	...	...	...	385

SECONDARY SCHOOLS

Arbury (Modern)	...	...	...	...	502
Higham Lane (Modern)	...	...	...	...	344
Manor Park (Modern and Technical)	...	...	...	...	472
Swinnerton (Modern)	...	...	...	...	423
High School for Girls (Grammar)	470

Voluntary Schools

King Edward VI (Grammar)	366
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NURSERY SCHOOLS

Avenue Road	40
Stockingford	40
Total number of children on school register:					
Primary Schools	...	...	...	...	6,814
Secondary Schools	...	...	...	...	2,577
Nursery Schools	...	...	...	...	80
					9,471

CLINICS

Service.	Situation of Premises.	Days Open.
Minor Ailment Clinics	Riversley Park, Coton Road	Monday and Thursday, 9—12 noon. Medical Officer in attendance.
	Cross Street, Stockingford	Tuesday and Friday, 9—12 noon. Medical Officer in attendance.
Treatment Clinics	Riversley Park, Coton Road	Every week-day morn- ing, 9—10 a.m.
	Cross Street, Stockingford	Every week-day morn- ing, 9—10 a.m.

The following Clinics are by appointment only:

Eye Clinic	Riversley Park, Coton Road	(1) Monday Twice monthly, at 9 a.m. (2) Every Tuesday at 9 a.m. (3) Alternate Fridays at 9 a.m.
Orthopædic Clinic	Riversley Park, Coton Road	Intermediate treat- ment: Monday 9—12 noon. Tuesday and Friday 2—5 p.m. Con- sultant in attendance on the last Friday of each month.
Ultra-Violet Light Clinic	Riversley Park, Coton Road	Monday and Thursday at 2 p.m.
	Cross Street, Stockingford	Monday and Thursday at 10-45 a.m.
Dental Clinic	Riversley Park, Coton Road	Monday, Tuesday, Wed- nesday, Thursday and Friday, 10—12.30 p.m. Tuesday and Thursday 2—5 p.m.
Speech Therapy Clinic	Riversley Park, Coton Road	Every Monday, 10 a.m. —1 p.m. Every Wednesday 9 a.m. —1 p.m., 2—5 p.m.
Child Guidance Clinic	Riversley Park, Coton Road	Wednesday and Friday, 10—12 noon.

School Medical Department,
Council House,
Nuneaton
16.5.53

To The Chairman and Members of the Committee for Education,
Nuneaton:

Mr. Chairman, Ladies and Gentlemen,

The total number of children on the school register has increased by rather more than one thousand during the course of the year, and approximately one third have been examined at periodic medical inspections.

At the start of the year an epidemic of measles was in full swing, and although this had substantially declined by the end of February cases continued to occur in fair numbers until mid summer; throughout the year there has also been a considerable amount of scarlet fever, mostly very mild, and other streptococcal infections. I believe these two diseases have been responsible for a great deal of minor ill-health among school children throughout the year.

The latter is reflected in the rather higher proportion of defects detected upon periodic medical inspection, of which one-third were due to upper respiratory disorders or their sequelæ; defects of vision constituted one-sixth and orthopædic defects one-ninth of the total. The assessment of general condition may have been similarly affected, though this is subject to some variation due to changes of staff and climatic conditions at the time of examination.

When addressing a Parent-Teacher Association recently I was able to show, by reference to the School Medical Officer's Report for some twenty-five years ago, that the main advance appears to have been the diminished number of children who are unclean and the corresponding diminution of skin disorders; it is disappointing to have to record, therefore, that during the year one child in every forty-three examined for this purpose was found to be infested with head lice. As I have reported previously, there is no excuse for this at a time when advice and effective remedies are to be easily obtained without direct charge.

From the statistical report it will be seen that a very large number of pupils continue to attend the minor ailment clinics held in the town, that 169 children were examined for employment, that 39 handicapped pupils were ascertained during the course of the year; these figures do not include 136 miscellaneous examinations carried out at places other than the schools or clinics nor considerable number of examinations of children previously ascertained to be handicapped and the subject of periodic review.

For the second year in succession attention has been directed especially to handicapped pupils and potentially handicapped pupils with the result that the number on the register now stands higher than previously; if sufficient staff are available it is likely that this total will be increased during the course of the next few years and it is probable that the number of pupils who are

educationally sub-normal would be sufficiently large to warrant a special school for this purpose within the Borough.

In addition 31 persons entering the teaching profession or applicants for entrance to a Training School have been examined during the course of the year, in accordance with Ministerial Circulars 248 and 249, which give effect to the recommendations of the Joint Tuberculosis Council made in 1950.

During the course of the year the Mass Miniature Radiographic Unit of the Birmingham Regional Hospital Board visited the town, and by arrangement with the Director this facility was made specially available to all school teachers and to all school-leavers. 1,135 school leavers were examined, of which 546 were boys and 589 were girls, and of this number there were referred to the Chest Clinic four inactive cases of tuberculosis and two active post primary cases, both of which were pupils. Upon the previous occasion when this Unit visited the Borough 856 school children were examined of whom five were referred to the Chest Physician, but of the nature of their complaints I have no record.

Ear, Nose and Throat Clinic

Upon the establishment of the National Health Service in 1948 it was made clear, by Circular 179, that Hospital Boards would normally take over the responsibility for providing out-patient specialist services for school children, hitherto provided by the local Education Authorities, when they were in a position to do so. In this way the Ear, Nose and Throat Clinic at Riversley Park was transferred to the Birmingham Regional Hospital Board in June, 1952, and has since then been conducted at the local Hospital as part of the Out-Patients Department.

Upon his appointment in April, 1946, Mr. Ogilvy Reid conducted a clinic for consultation and treatment at Riversley Park Clinic, and performed operative treatment at the Manor Hospital upon those cases requiring it; since 1948 operative treatment has been carried out by other Regional Hospital Board Surgeons in addition, and since 1950 at Bramcote Hospital.

During 1951, the last complete year, there were 606 first attendances at Riversley Park Clinic and 176 subsequent attendances, made by children from Nuneaton and surrounding districts; of these 475 were referred for operation and 498 tonsillectomies were performed during the year on these and other children already awaiting the operation.

It was in January, 1951, that a Circular was received from the Ministry advising School Medical Officers to keep the less urgent cases under observation before referring them to the Ear, Nose and Throat Surgeon for his opinion, and as is shown in tables 2A for 1951 and 1952 this has been carried out to a much greater extent than formerly.

The demand remained heavy, however, for at the beginning of May, 1952, there were 120 cases awaiting consultation and over 300 awaiting operation. It is, therefore, somewhat surprising that the Hospital Ear, Nose and Throat Out-Patient Department, which had 689 fresh cases of all ages in 1950 and 721 in 1951, contemplated taking over the 600 additional new patients annually from Riversley Park Clinic without first augmenting the

consultative facilities. The number of children awaiting operation has since then been reduced considerably, and so also has the number awaiting consultation, but the latter has only been achieved by over-crowding the Out-patient Department, and one is bound to question the advisability of tonsillectomy upon such a large scale.

One of the important physiological functions of tonsils and adenoids is believed to be a sort of biological filtration, preventing the general spread of local infections. Their enlargement at the time of infection, however, and often the accompanying deafness, provoke patients to open their mouths in order to breathe and to hear better; frequently repeated infections, therefore, may result in the patient breathing through his mouth continuously, instead of through his nose, and this in turn ensures that the local infection is perpetuated.

This is the sequence of events that causes much minor ill-health, that predisposes to other and often more serious conditions, and which is responsible for about one child in three in Nuneaton undergoing operation for the removal of tonsils and adenoids before leaving school. This very expensive Hospital treatment causes discomfort to the patient, and some anxiety to the parents, who pay for it indirectly, but could in many cases prevent it.

There are indeed some children who on account of some defect, may inevitably require operative treatment of some kind, but there are many more whom wise parent-craft could spare this unpleasantness. Simple, homely care—good food, rest as well as exercise, suitable clothing, and dry footwear, would prevent many colds; but above all the provision and use of handkerchiefs when the child has a cold would help to restore a proper nasal airway.

These are ways in which parents, not teachers or doctors, can help their children and themselves and by moderate expenditure could substantially reduce the very high cost of the health services, which in this respect can scarcely be considered economical any more.

Dr. K. R. Thomas has kindly provided a note on the work of the Child Guidance Clinic during the year, and I would not like to let this opportunity pass without thanking the many consultants, almoners and administrative staff of the hospital and specialist services, and local general practitioners for their help, and in particular for the provision of clinical reports.

I wish to thank all members of the school health service for their industry, the Borough Education Officer for his help and his advice, and am very grateful to you, Mr. Chairman, and the members of your Committee for your sympathetic consideration during 1952.

I am,

Mr. Chairman, Ladies and Gentlemen,

Your obedient servant,

G. R. KERSHAW,

School Medical Officer.

SCHOOL MEDICAL SERVICE

ANNUAL RETURNS FOR THE YEAR ENDING
DECEMBER 31st, 1952

TABLE I

Medical Inspection of Pupils attending Maintained and Secondary Schools.

1.—PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY MODERN SCHOOLS

A—Number of inspections in the prescribed Groups:

Entrants	...	...	...	...	...	...	...	...
Second Age Group			...	...	...	...	...	766
Third Age Group	...		...	...	...	...	...	465
							Total	...
								2,626
8 years old (Vision)		...	...	...	...	...	...	708
							Grand Total	...
								3,334

B—Other inspections:

Number of Special Inspections	...	...	...	...	147
Number of Re-Inspections	...	...	...	...	394
				Total	541

2—PUPILS ATTENDING MAINTAINED SECONDARY
GRAMMAR SCHOOLS:

A—Number of inspections in the prescribed Groups:

Third Age Group	128
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B—Other inspections:

Number of other periodic Inspections:

Age Groups						
Aged 13 years	49
Aged 12 years	...	...	...	...	...	102
Aged 14 years	...	...	...	...	...	8
						<hr/> 159
Number of Special Inspections		...	...	...	...	37
Number of Re-inspections	...	...	...	...	...	29
						<hr/>
					Total ...	225
						<hr/> <hr/>

TABLE I (C)

PUPILS FOUND TO REQUIRE TREATMENT

Number of individual pupils found at Periodic Medical Inspection to require treatment (excluding Dental Diseases and Infestation with Vermin).

GROUP 1	For defective vision (excluding squint) 2	For any other condi- tions recorded in Table IIa 3	Total Individual Pupils 4
1. Pupils attending Maintained Primary and Secondary Modern Schools:			
Entrants	17	207	202 (14.5%)
Second Age Group	20	120	132 (17%)
Third Age Group	23	13	36 (7.7%)
Total (prescribed groups)	60	340	370 (14%)
8 years old (vision)	63	3	65
Grand Total	123	343	435
2. Pupils attending Maintained Secondary Grammar Schools:			
Third Age Group	6	1	7

TABLE II (A)
RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN
THE YEAR ENDED DECEMBER 31st, 1952

**1. Pupils attending Maintained Primary and Secondary
Modern Schools**

Defect Code No.	DEFECT OR DISEASE	Periodic Inspections Prescribed Groups and 8 years old		Special Inspections Do not include re-inspections	
		No. of Defects		No. of Defects	
		Requiring treatment.	Requiring to be kept under observation but not requiring treatment.	Requiring treatment.	Requiring to be kept under observation but not requiring treatment.
4	Skin	17	30	2	3
5	Eyes:				
	(a) Vision	123	106	6	7
	(b) Squint	21	25	1	5
	(c) Other	4	8	1	—
6	Ears:				
	(a) Hearing	1	12	1	1
	(b) Otitis Media	3	34	1	2
	(c) Other	2	11	—	—
7	Nose or Throat	44	179	5	13
8	Speech	3	15	1	1
9	Cervical Glands	2	105	—	3
10	Heart and Circulation	11	18	—	2
11	Lungs	7	116	—	9
12	Developmental:				
	(a) Hernia	1	4	—	1
	(b) Other	6	43	—	2
13	Orthopædic:				
	(a) Posture	3	29	—	—
	(b) Flat Foot	13	40	1	1
	(c) Other	22	51	1	4
14	Nervous System:				
	(a) Epilepsy	—	1	—	1
	(b) Other	1	19	—	3
15	Psychological:				
	(a) Developmental	1	20	1	2
	(b) Stability	—	24	1	3
16	Other (excluding Dental defects) ..	181	116	5	10
	Totals	466	1006	27	73

RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN
THE YEAR ENDED DECEMBER 31st, 1952

2. Pupils attending Maintained Secondary Grammar Schools

Defect Code No.	DEFECT OR DISEASE	Periodic Inspection. leavers		Other Periodic Inspections		Special Inspections	
		Requiring treatment	Requiring to be kept under observation	Requiring treatment	Requiring to be kept under observation	Requiring treatment	Requiring to be kept under observation
4	Skin	—	—	—	—	—	1
5	Eyes:						
	(a) Vision ..	6	2	8	6	2	1
	(b) Squint	—	—	2	1	—	—
	(c) Other	—	—	—	2	—	—
6	Ears:						
	(a) Hearing	—	—	—	—	—	—
	(b) Otitis Media ..	—	—	—	—	—	—
	(c) Other	—	—	—	1	—	—
7	Nose or Throat	—	—	—	2	—	1
8	Speech	—	—	—	—	—	—
9	Cervical Glands	—	—	—	1	—	—
10	Heart and Circulation	1	—	—	2	—	—
11	Lungs	—	2	—	2	—	—
12	Developmental:						
	(a) Hernia	—	—	—	—	—	—
	(b) Other	—	—	—	3	—	—
13	Orthopædic:						
	(a) Posture	—	—	—	1	—	—
	(b) Flat Foot	—	—	—	2	1	—
	(c) Other	—	1	1	5	—	1
14	Nervous System:						
	(a) Epilepsy	—	—	—	—	—	—
	(b) Other	—	—	—	2	—	—
15	Psychological:						
	(a) Developmental ..	—	—	—	—	—	—
	(b) Stability	—	—	—	—	—	—
16	Other (excluding Dental Defects) ..	—	—	1	3	—	1
Totals		7	5	12	33	3	5

TABLE II (B)

**CLASSIFICATION OF THE GENERAL CONDITION OF PUPILS
INSPECTED DURING THE YEAR IN AGE GROUPS**

AGE GROUPS	Number of Pupils inspected	A (good)		B (fair)		C (poor)	
		No.	% of Col. 2	No.	% of Col. 2	No.	% of Col. 2
1	2	3	4	5	6	7	8
1. Pupils attending Maintained Primary and Secondary Modern Schools							
Entrants	1395	572	41.1	815	58.4	8	.5
Second Age Group	766	299	39	454	59.2	13	1.8
Third Age Group	465	65	14	396	85.1	4	.9
2. Pupils attending Maintained Secondary Grammar Schools							
Third Age Group	128	48	37.5	80	62.5	—	—

TABLE III—INFESTATION WITH VERMIN

1—Total number of examinations in the schools by the school nurses or other authorised persons	14,292
2—Total number of individual pupils found to be infested	331
3—Number of individual pupils in respect of whom cleansing notices were issued	—
4—Number of individual pupils in respect of whom cleansing orders were issued	—

TABLE IV

Treatment known to have been provided for children from maintained primary and Secondary Schools by the Regional Hospital Board.

	Number of individual children treated						
1. Skin							
(a) Ringworm — Scalp	—
Body	—
(b) Scabies	—
(c) Impetigo	—
(d) Other Skin Diseases	8
2. Eye (treatment other than that given in our own clinics)							
(a) External and other (excluding errors of refraction and squint)	—
(b) Errors of refraction (including treatment of squint <i>other than</i> orthoptic treatment, for which see Table V)	9
(c) Number of pupils for whom spectacles were prescribed	—
(d) Number of pupils for whom spectacles were obtained	—
3. Ear, Nose and Throat							
(i) Received <i>operative</i> treatment							
(a) for Diseases of Ear	1
(b) for Adenoids and Chronic Tonsillitis	259
(c) for Other Nose and Throat Conditions	—
(ii) Received other forms of treatment	3
4. Other treatment given (excluding Orthopædic and Child Guidance)							
(a) Respiratory Conditions and Infectious Disease							37
(b) Abdominal Conditions	11
(c) Accidents	11
(d) Heart Conditions, Chorea and Rheumatism	11
(e) Other Conditions	70

TABLE V

TREATMENT OF EYE DISEASES, DEFECTIVE VISION AND
SQUINT AT COUNTY EYE CLINICS

Ophthalmic Part-Time Staff

No. of Sessions—68

DR. C. E. CLARK

Number of children who attended in 1952:	
New cases	318
Re-examinations	371
Number of children prescribed spectacles in 1952:	
New cases	174
Re-examinations	194
Number of pupils for whom spectacles were obtained	259
Number of children referred for orthoptic treatment:	
(a) by County Orthoptists	—
(b) by R.H.B. Orthoptists	62
Number of children known to have received orthoptic treatment during the year:	
(a) by County Orthoptists	—
(b) by R.H.B. Orthoptists	43
Number of children treated for Eye Diseases at clinics (excluding errors of refraction and squint)	5
Total cases on register at 31st December, 1952	1,083

TABLE VI (A)

SPEECH THERAPY

Number of sessions	120
Number of children attending at 1st January, 1952	22
Number of first attendances during 1952	27
Number of children recalled during 1952 after having been stood down in a previous year	5
Total number of children treated during 1952	54
Number discharged during 1952:	
(a) Treatment completed and N.A.D.	5
(b) Stood down under review	10
(c) Left district	10
(d) Ceased attendance	3
Total number of attendances	681

CLINICAL ANALYSIS OF SPEECH DEFECTS TREATED
DURING 1952

<i>Defect</i>	<i>No. treated</i>
Dyslalia	17
Sigmatism	—
Late development of speech	—
Dysarthria	—
Spastic speech	4
Stammer	22
Dysphonia	—
Hyperrhinophonia	1
Cleft palate	4
Chronic mouth breather ...	2
Idioglossia	1
Deaf	2

TABLE VI (B)
SPEECH THERAPY
Completed Treatment

<i>Type of defect</i>	<i>Cured or much improved</i>	<i>Moderate improvement</i>
Stammer	3	1
Dyslalia	—	—
Sigmatism	—	—
Cleft palate	—	—
Late development of speech	—	—
Spastic speech	—	—
Other defects	—	—
Totals	3	1

TABLE VII
MINOR AILMENT CLINICS

Only children actually treated at the clinics, not those referred elsewhere for treatment.

DEFECT OR DISEASE	Nuneaton Clinic		Stockingford Clinic	
	227 sessions		203 sessions	
	No. of first attendances	No. of subsequent attendances	No. of first attendances	No. of subsequent attendances
Skin:				
Ringworm—Scalp ..	2	6	—	—
Body ..	5	42	10	10
Scabies	6	27	1	1
Impetigo	12	26	38	96
Other Skin Diseases	297	720	255	401
Eye:				
Blepharitis	1	2	9	4
Conjunctivitis	25	24	30	50
Other minor eye conditions	81	72	88	47
Ear:				
Miscellaneous minor ear conditions ..	56	153	59	94
Nose and Throat:				
Miscellaneous minor nose and throat conditions	24	17	75	37
All other minor ailments	762	1313	950	796
Totals	1271	2402	1515	1536
Grand Total—6,724				

NUMBER OF CHILDREN REFERRED TO PÆDIATRICIANS

<i>Disease</i>	<i>Number of cases</i>
Petit Mal	1
Epilepsy	3
Respiratory Infection ...	33
Cervical glands	4
Nephritis	2
Obesity	4
Enteritis	1
Infective Hepatitis	1
Colitis	1
Diabetes	2
Enuresis	7
Heart conditions	7
Icthyosis	1
Chorea	2
Asthma	2
Anæmia	1
Pyrexia	3
Fainting attacks	5
Constipation	3
Nervousness	9
Abdominal Pains	4
Headaches	3
Mesenteric Lymphadenitis	1
Tuberculous Cervical Adenitis	1
Rheumatism	1
Scars after burning ...	1
Virus Meningitis	1
Lymphadenopathy	1

EMPLOYMENT OF CHILDREN BYE-LAWS

Number of children examined under employment of children
bye-laws:

Number of children examined	169
Number of certificates granted	169

ORTHOPÆDIC CLINIC

ANALYSIS OF CHILD CASES, 1952

Number of cases continued treatment from 1951	224
Number of new cases 1952	167
Tuberculosis	14
Spastic paralysis	12
Infantile paralysis	10
Rickets	1
Bone injuries	24
Spinal deformities	32
Flat foot	124
Club foot	8
Osteomyelitis	2
Knock Knees	104
Other conditions	198
Number treated in Hospital	28
Instruments supplied	170
Clinics attended by Consultative Surgeon	11
Attendances at same	566
Attendances at Treatment Clinics	4,074
Total attendances	4,640
Number discharged	54

DENTAL INSPECTIONS AND TREATMENT

1.—No. of children inspected by Dental Surgeon:							
(a) Routine Age Groups	...	...	...	...	...	—
(b) Specials	...	...	...	...	...	1,425	
(c) Total Routine and Special	...	...	...	...	...	1,425	
2.—No. of new cases treated	...	...	...	...	...	1,101	
3.—No. of cases completed	..	...	...	...	...	992	
4.—No. of attendances made by children for treatment	...	...	...	...	...	2,694	
5.—No. of sessions held for:							
(a) Inspection	...	...	...	...	...	—
(b) Treatment	...	...	...	...	...	275	
6.—Fillings:							
Permanent teeth	...	...	...	...	...	1,604	
Temporary teeth	...	...	...	...	...	289	
7.—Extractions:							
(a) Permanent teeth	...	...	...	...	...	661	
(b) Temporary teeth	...	...	...	...	...	1,154	
8. Administration of general anæsthetic for extraction	...	...	...	...	...	404	
Administration of local anæsthetic for extraction	...	...	...	...	...	445	
9.—Other operations:							
Permanent teeth	...	...	...	...	...	615	
Temporary teeth	...	...	...	...	...	255	

ULTRA-VIOLET LIGHT CLINIC—RIVERSLEY PARK

Number of cases treated	...	...	...	...	...	144
Period of treatment	...	...	...	3—8	weeks	
Cases cured	...	...	...	...	...	48
Cases much improved	...	...	...	...	...	49
Cases improved	...	...	...	...	...	19
Cases with condition not changed	...	...	...	...	...	4
Course not completed	...	...	...	...	...	6
Under observation at end of year	...	...	...	...	...	18

ULTRA-VIOLET LIGHT CLINIC—STOCKINGFORD

Number of cases treated	...	...	...	...	...	62
Period of treatment	...	...	...	3—6	weeks	
Cases cured	...	...	...	...	...	42
Cases much improved	...	...	...	...	...	10
Cases improved	...	...	...	...	...	1
Cases with condition not changed	...	...	...	...	...	2
Course not completed	...	...	...	...	...	4
Under observation at end of year	...	...	...	...	...	3

**HOME VISITS PAID BY THE SCHOOL NURSE AND HEALTH
VISITORS/SCHOOL NURSES**

No. of visits on account of:

Personal Hygiene	...	...	...	...	...	...	255
Others—follow up	...	...	...	...	...	...	453

DIPHTHERIA IMMUNISATION

Number of children who have been immunised up to
31st December, 1952:

<i>Age</i>	<i>No.</i>
15 years	696
14 years	626
13 years	460
12 years	639
11 years	517
10 years	609
9 years	635
8 years	706
7 years	706
6 years	672
5 years	106
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Total . .	6,412
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HANDICAPPED PUPILS

DETAILS OF PUPILS ON HANDICAPPED PUPILS REGISTER AT 31-12-52

CATEGORY	Previously Ascertained	Ascertained in 1952	Total on Register
A. Blind	1	—	1
B. Partially sighted	—	1	1
C. Deaf	5	1	6
D. Partially deaf	2	—	2
E. Delicate	4	3	7
F. Diabetic	—	—	—
G. Educationally subnormal	56	20	76
H. Epileptic	5	—	5
I. Maladjusted	2	1	3
J. Physically handicapped	15	8	23
Mentally deficient	29	5	34
TOTAL	119	39	158

RIVERSLEY PARK CHILD GUIDANCE CLINIC, 1952

The figures for 1952, in general, comparable to those for previous years, though the temporary rise in new referrals was not maintained.

The clinic team has remained the same, with Miss E. A. Eattell as Senior Clinical Psychologist and Mrs. Joan Williams as Psychiatric Social Worker. Miss J. Cooper, Assistant Clinical Psychologist, who had been particularly concerned with playroom therapy and whose contribution to the work of the clinic had been a most valuable one, has left to return to Australia, and her place has been taken by Miss P. Daniels.

The good relations existing between clinic, Education and Medical Authorities, and parents, noted in the last report, was maintained, but it is felt that improved equipment would lead to a considerable gain in efficiency, and this matter is now receiving careful attention.

KENNETH R. THOMAS,
Consultant Psychiatrist.

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